COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF **ATTORNEY**

(Includes Reference to PCT International Applications)

ATTORNEY'S **DOCKET NUMBER** P01,0240

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name

inventor (if plu	ral names are lis invention entitle "M	sted below) of the subject d: ETHOD AND DEVICE FO	one nam matter w	ne is listed below) or an original is distention of the control of	nal, first and joint th a patent is
the specificati		eck only one item below):		MENSIONAL SIGNALS	
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PRIOR FORE	IGN/PCT APPLI	CATION(S) AND ANY PI	RIORITY	CLAIMS UNDER 35 U.S.C	. 119:
COUNTRY (if PCT indicate "PCT")		APPLICATION NUMI	BER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Germany		199 01 228.8		14.01.99	■YES □NO
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the Unite that/thos material	ed States of America t se prior application(s) in information as defined	hat is/a nthe m l-in Titl	5, United States Code, § are listed below and, ins anner provided by the fire a 37, Code of Federal Re filling date of this applic	ofar as the st paragrap egulations,	subject mater of each of Title 35, Untied 5	ch of the claims o States Code, §112	f this application is , I acknowledge th	s not disclosed in e duty to disclose					
PRIOR	U.S. APPLICATIONS	OR PC	T INTERNATIONAL AF	NS DESIGNATING	THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:								
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transact	POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected herewith. And I hereby appoint all Attorneys identified by the United States Patent & Trademark Office Customer Number 26574, who are all members of the firm of Schiff, Hardin & Waite.												
Send Correspondence to: SCHIFF, HARDIN & WAITE Patent Department 6600 Floor Sears Tower, Chica				ago, Illinois 60606			Direct Telephone Calls to: 312/258-5790						
	FULL NAME OF	Customer Number 26574) FAMILY NAME RASS			FIRST GIVEN NAME		SECOND GIVEN NAME						
2	RESIDENCE & CITIZENSHIP	CITY	nberg		STATE OR FOREIGN COUNTRY Germany DEX		COUNTRY OF CITIZENSHIP Germany						
1	POST OFFICE ADDRESS		T OFFICE ADDRESS notauer Str. 89		CITY Nürnberg		STATE & ZIP CODE/COUNTRY D-90480 Nümberg, Germany						
	FULL NAME OF INVENTOR		ILY NAMÉ EGER		FIRST GIVEN NAME GERHARD		SECOND GIVEN NAME						
2 0	RESIDENCE & CITIZENSHIP	CITY Erla	ngen		STATE OR FOREIGN COUNTRY Germany DEX		COUNTRY OF CITIZENSHIP Germany						
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2 0	FULL NAME OF INVENTOR	FAMI	ILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME						
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to be true	e; and further that the	se state	ade herein of my own kn ements were made with ection 1001 of Title 18 o t issulng thereon.	the knowle	adge that willful false	statements and t that such willful fa	he like so made a lse statements ma	re punishable by ay jeopardize the					
SIGNATI	SIGNATURE OF INVENTOR 201 SIGNATURE OF IN			ENTOR 20	2 Steel	SIGNATURE C	SIGNATURE OF INVENTOR 203						
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